



CITY OF ROCKVILLE  
DEPARTMENT OF PUBLIC WORKS  
111 Maryland Avenue, Rockville, MD 20850 (240) 314-8500  
**STORMWATER MANAGEMENT PERMIT APPLICATION**

Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Telephone No. \_\_\_\_\_

Site Address: \_\_\_\_\_

Project Name: \_\_\_\_\_

Project Location: should be consistent with project name on plans, specifications, letters, operation and maintenance agreements, etc.

Subdivision \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_

Water Shed: \_\_\_\_\_ Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_ of project

Contact person who can answer questions about the project:

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Engineering Firm: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Telephone No. \_\_\_\_\_

Specify whether project is (check one): \_\_\_\_\_ New \_\_\_\_\_ Redevelopment \_\_\_\_\_ Permit Revision

If this applications if being submitted as the result of a revision to an existing permit, list the existing permit number and its issue date (if known) \_\_\_\_\_

Type of on-site SWM	SWM Alternatives (Including Monetary Contribution)
1. _____	(WQ <sub>v</sub> ) Water Quality _____ ac.
2. _____	(Cp <sub>v</sub> ) Water Quantity _____ ac.
3. _____	(Qp <sub>10</sub> ) Water Quantity _____ ac.
4. _____	Other (Explain) _____
5. _____	_____

USE Permit No. \_\_\_\_\_

Total Project Area: \_\_\_\_\_ sq. ft

Total area to be disturbed: \_\_\_\_\_ sq. ft.

Floodplain variance required (Check One) \_\_\_\_\_ Yes \_\_\_\_\_ No

State/Federal Permit \_\_\_\_\_ Yes \_\_\_\_\_ No (provide permit number \_\_\_\_\_)

Wetland Permit \_\_\_\_\_ Yes \_\_\_\_\_ No (provide permit number \_\_\_\_\_)

## STORMWATER MANAGEMENT PERMIT APPLICATION

Complete the following information for each Facility. If there are more than two facilities in the project, attach an additional sheet with the information for each area provided in the same format as below.

<b>Facility Information</b>	<b>Facility 1</b>	<b>Facility 2</b>
Drainage Area (sq ft) (Total)		
Drainage Area – SWM Provided		
(WQ <sub>v</sub> ) Water Quality		
(Cp <sub>v</sub> ) Water Quantity		
(Qp <sub>10</sub> ) Water Quantity		
Proposed Impervious Area		
% Impervious Area (total)		
Recharge Volume (Yes or No)		
Ownership (Public or Private)		

I, hereby certify that the property owner has authorized the filing of this application and performance of work as described above.

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

### NOTES:

- Application must be signed by the person or authorized corporate representative posting the bond.
- Application must be submitted along with plans, fees, and relevant checklists which have been completed and signed (e.g., Stormwater Management Pond Plan Review Checklist, Underground Stormwater Management Facility Design Review Checklist, Infiltration Stormwater Management Facility Design Review Checklist, Single Family Home and Site Development Plan Checklists).

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### *For Public Works Use Only*

SWM Permit No. \_\_\_\_\_

PWK Permit No. \_\_\_\_\_

SCP Permit No. \_\_\_\_\_

Project Engineer \_\_\_\_\_

Distribution: Administration • Project Engineer • Applicant